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ABSTRACT

This guide accompanies a five-part video series on learning disabilities (total length of 40 minutes), designed to help in the identification of children who may have learning disabilities and in the development of appropriate actions on their behalf. The guide introduces three children, whose true stories are told in the videos to illustrate the challenges commonly faced by children with learning disabilities and those close to them. Sections of the guide then specifically address the following topics: (1) characteristics, indicators, and warning signs of learning disabilities; (2) benefits of early identification; (3) definitions of relevant terms; (4) the impact of learning disabilities on family, school, and community; (5) useful techniques for working with the learning disabled; (6) the purpose of a comprehensive assessment; (7) the components of a comprehensive assessment; (8) legal rights of children and youth with disabling conditions; (9) effective advocacy techniques; and (10) student placement options. Each section includes questions for discussion and references. (JDD)

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WE CAN LEARN

UNDERSTANDING AND HELPING CHILDREN WITH LEARNING DISABILITIES

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We Can Learn: Understanding and Helping Children With Learning Disabilities was developed and written as a resource for parents, teachers and others concerned about children with learning disabilities. At the time of its development, considerable care and effort were exercised in gathering and verifying information in the Series and accompanying Manual. However, neither the National Center for Learning Disabilities inc. nor the publisher is responsible for changes, errors or omissions. Furthermore, the National Center for Learning Disabilities inc. does not endorse individual consultants, schools, groups or organizations. Neither do they endorse or recommend any specific treatments, therapies, approaches or techniques. We welcome the input and comments of those utilizing the Series and accompanying Manual.

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WE CAN LEARN

UNDERSTANDING AND HELPING CHILDREN WITH LEARNING DISABILITIES

RESOURCE GUIDE TO ACCOMPANY NCLD'S FIVE-PART VIDEO SERIES ON LEARNING DISABILITIES

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Anne Ford, Chairman of the National Center for Learning Disabilities

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PREPARED BY: FAGIN, NUZUM, SAUER ASSOCIATES
IN COOPERATION WITH THE PROFESSIONAL ADVISORY BOARD
OF THE NATIONAL CENTER FOR LEARNING DISABILITIES INC.
NEW YORK, NEW YORK 1991

FOREWORD

My heart goes out to all children with learning disabilities and those who care about them. Whether it is a young child, an adolescent or adult, the pain is the same and it is shared by all. I have a daughter with learning disabilities, and I certainly empathize with the constant struggles these children face. I hope you realize that a child's learning disability is a disability with hope. There are ways you and others can help the child learn and reach his or her true potential. It takes commitment and resources to bring that help to the people who need it.

That commitment is what propels organizations like the National Center for Learning Disabilities (NCLD). NCLD was founded 15 years ago by Carrie (Mrs. Pete) Rozelle. As the mother of two learning disabled sons, Mrs. Rozelle found no help when she needed it most. She established NCLD to help other parents find the resources for their children, hoping that no other parent would have to go through what she had.

I am now the Chairman of NCLD for the same reasons. When my daughter was first diagnosed with learning disabilities 14 years ago, my instinct was to do everything humanly possible to help her. Much to my shock and dismay, I learned there was little help available. I felt alone and powerless. At that time, I wondered if other families were experiencing the same frustration and disappointment. I now know they were . . . and are! We've come a long way since then, but there still remains a great deal more that can be done.

Today there is help available. Much of our challenge involves bringing the existing resources and knowledge to the attention of those in need.

That's why I applaud *We Can Learn: Understanding and Helping Children With Learning Disabilities* and all of the volunteers and professionals who developed it. This resource captures many valuable suggestions and guidelines for you as a parent, teacher, professional or advocate . . . and for anyone who comes into contact with an individual with learning disabilities.

The video series and this accompanying resource guide offer valuable information and assistance in a concise, interesting and easily understood manner. It is with great pleasure that I present it to you for your use. Please share this with others who can benefit from it so we may reach as many people as possible with this valuable resource.

Please also remember—although frustration and disappointment may continue to surface, there is great hope for our children. What they need is your love, support and understanding. Let us all work together so that no child slips through the cracks because no one cared enough!

With love and best wishes for children with learning disabilities,

Anne Ford

Anne Ford
Chairman, National Center for Learning Disabilities

ACKNOWLEDGEMENTS

We Can Learn was developed through the tireless efforts of a number of professionals and volunteers. Their collaboration resulted in the production of what promises to be a highly useful resource for the LD field.

NCLD is most grateful to the following organizations whose generous financial support made this resource possible:

The Fan Fox and Leslie R. Samuels Foundation

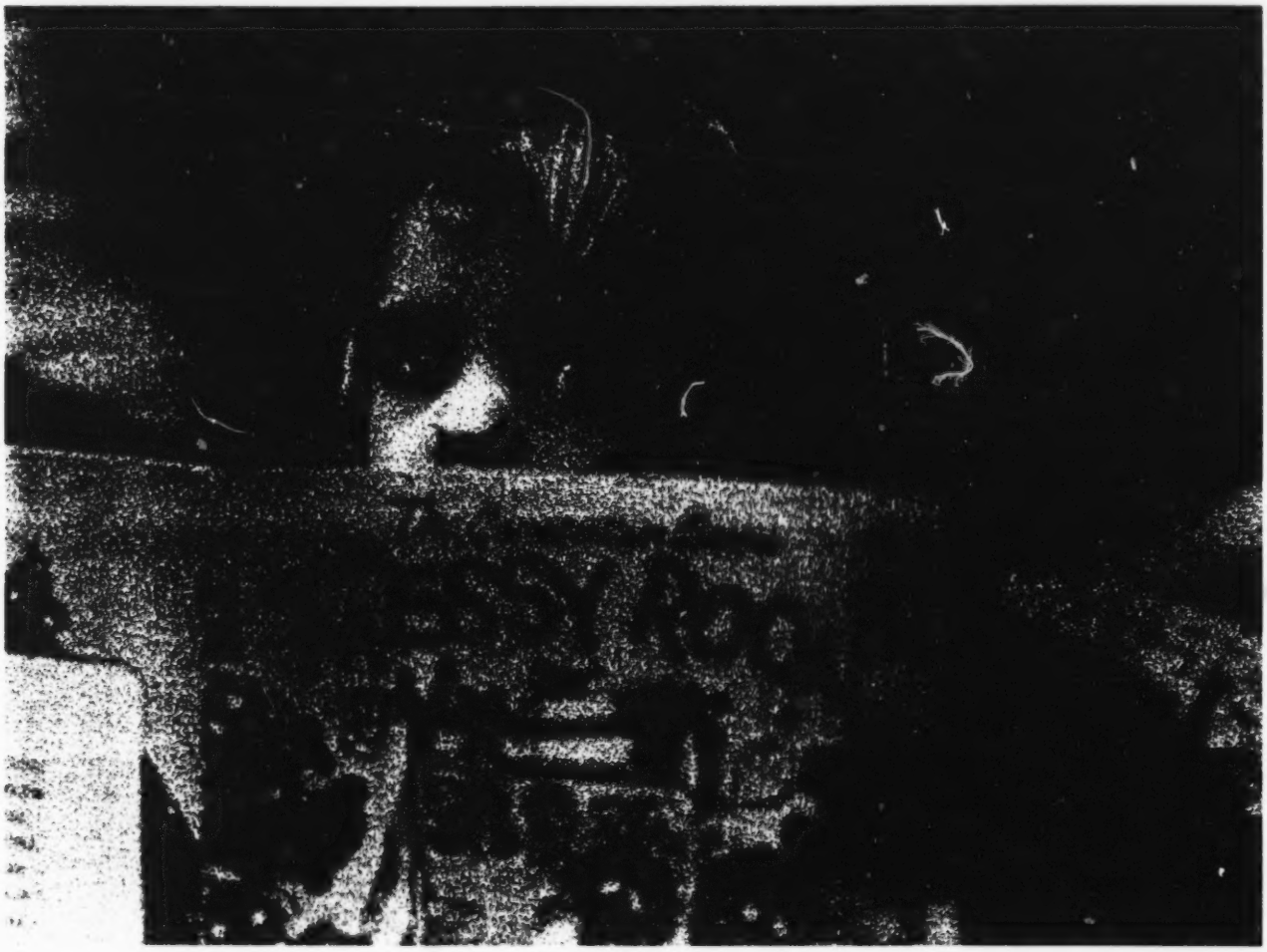
The Equitable Foundation

The Gannett Foundation

This production would not have been possible without the extraordinary talents of Chuck Scarborough and WNBC-TV News in New York City. The majority of production time and expenses were donated and their dedication to our efforts was tremendous. Thank you.

NCLD thanks all of the participants in the series and gives special thanks to Gregory, Taron and Ryan, their mothers and families.

Lastly, NCLD would like to thank several other volunteers and professionals who stood so committed to the success of this series: Judith Fagin, Margaret Nuzum, Arlyn Gardner and Sheila B. Plank of NCLD; and Ginny Russo Diaz, Jeff Scarborough and Vito Brunetti of WNBC-TV News. Thank you all for your commitment to "making this happen." ■



INTRODUCTION

Learning disabilities (LD) frequently are referred to as a "hidden handicap." The National Institutes of Health (NIH) estimate that between ten and 15 percent of the U.S. population have learning disabilities. If left unidentified and untreated, LD can limit a person's ability to learn and reach full potential.

Individuals with LD are generally of average or above average intelligence. It is believed that neurological impairment interferes with their ability to learn like others. The result can be difficulties with reading, writing, math and/or the social skills needed to function within one's environment. Undetected and untreated, learning disabilities can catapult children into other serious problems in school and social interactions.

However, there is great hope for children with learning disabilities. Early diagnosis, appropriate intervention and support, patience and understanding can help people with LD lead productive, satisfying lives.

NCLD created *We Can Learn: Understanding and Helping Children With Learning Disabilities* to help increase the awareness and understanding of LD. It is intended to help teachers and schools, parents, youth groups, social workers, psychologists and other professionals who work with young people, such as juvenile justice officials, identify children who may have learning disabilities and take appropriate action on their behalf.

We Can Learn has been made possible by funding from corporations and private foundations. Produced through a generous, in-kind contribution from WNBC-TV News in New York, and anchored by news anchor Chuck Scarborough, the video series features leading experts in the LD field, as well as real people of all ages who suffer from these hidden handicaps.

We Can Learn is comprehensive and easy to understand. The video and the guide are divided into segments on specific aspects of LD and can be used as a whole, or individually. Each segment includes learning objectives, commonly asked questions and references for those wishing additional information. Group discussions are often helpful in sharing information and building a support network for children with LD. Home study assures a thorough understanding of the issues.

Learning disabilities need not be permanent limitations. Examples of highly successful people who have overcome learning disabilities abound in all fields. Through *We Can Learn*, NCLD provides hope and practical steps to help more children find their way to success. ■

We Can Learn highlights the experiences of children, and their parents, teachers and therapists, along with observations of noted authorities in the field of learning disabilities. The true stories of three children and their families help illustrate the challenges commonly faced by children with learning disabilities, and those close to them. Their stories are introduced below:

GREGORY was a happy toddler, pleased with himself and with every new advance. But, as he approached two and a half, a change occurred. His parents became concerned because Gregory wasn't speaking. It was clear that Gregory's development was different from that of his older brother Jesse and from his friends. It was also clear that Gregory had "things" to s and that he was very frustrated because no one could understand him.

Though many people told them not to worry because Gregory was a bright boy and would learn to speak when he was ready, Gregory's parents knew that they had to get to the bottom of Gregory's language difficulty.

At first Gregory's mother Ann was at a loss as to how to proceed. In this video series you will learn how she researched the options available to Gregory, located a place where his skills could be evaluated and, based on that diagnosis, placed him in a special preschool for children with early signs of a learning disability and arranged for speech and language therapy.

TARON was a pleasant, easy going child who loved preschool and kindergarten. He enjoyed the toys and games, his friends and teachers. However, in first grade, his behavior changed. He became restless and had some outbursts during school. The teachers said he wasn't learning because he wasn't trying.

By second grade Taron was a known troublemaker and a poor student. His mother knew her son was not by nature a troublemaker and suggested that the school could do more to help Taron overcome his learning difficulties. The teacher suggested that maybe there was something at home that was causing Taron's behavioral difficulties. Tension brewed between home and school. Taron's mother was certain that the school could provide a more appropriate education for her son. She was certain that when he learned to read his behavior would improve.

Taron's mother decided not to rely on anecdotes, but to have Taron evaluated. The evaluation revealed that Taron was learning disabled, not emotionally disturbed. The video series will reveal the process she went through and the difficulties she encountered before securing an evaluation that recommended his placement in a resource room. The series also shows the steps his mother took to assure that the resource room at the local school was educationally appropriate for Taron.

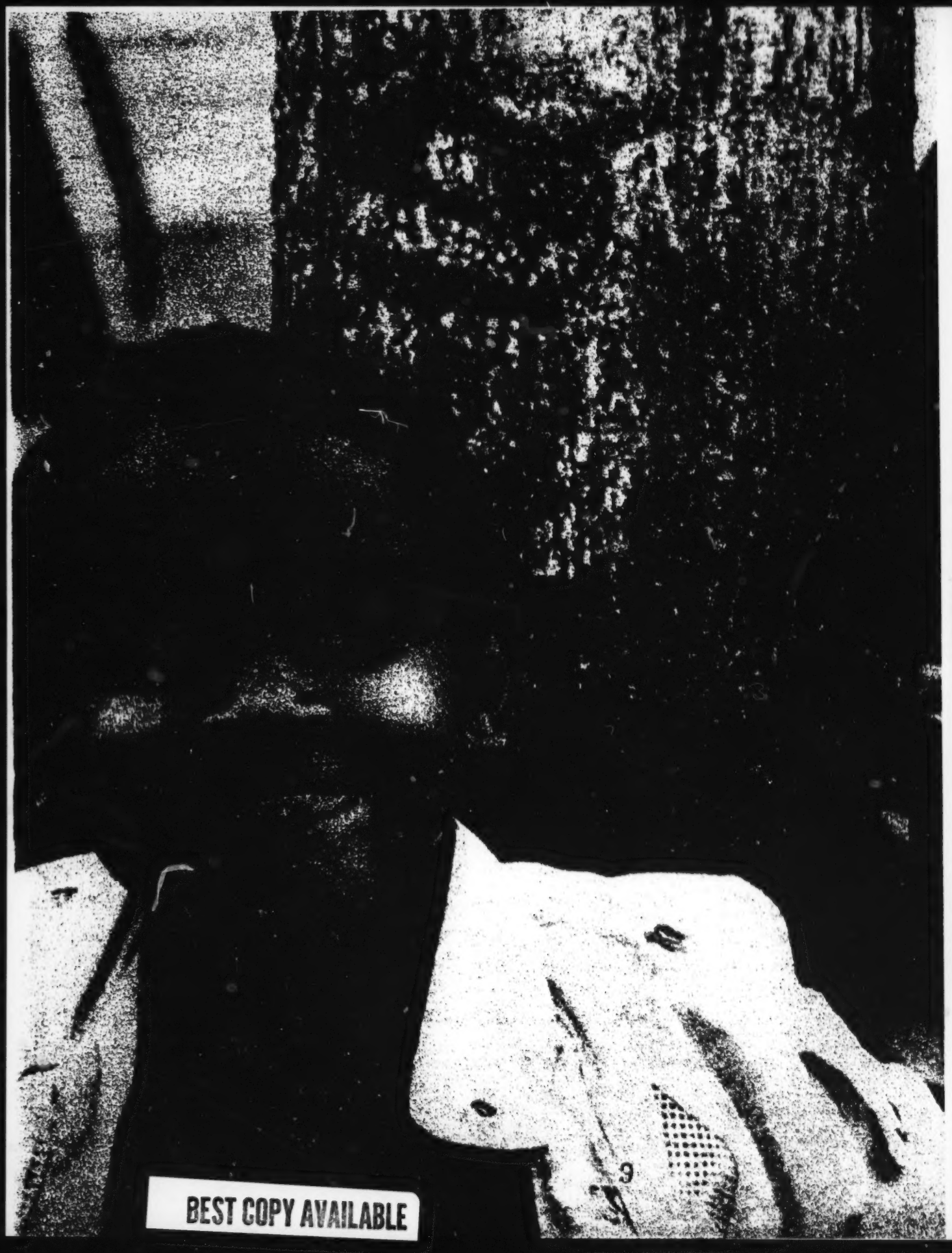
RYAN was a happy toddler who seemed to develop at a normal rate. He was very active and energetic. His high activity level did not concern his parents. However, his preschool teachers found his unfocused activity overly demanding. His teachers were concerned about Ryan's inability to pay attention, to follow directions and to work cooperatively for extended periods of time.

Ryan displayed extreme frustration in trying to learn academic skills. His progress in learning to read was slow and learning to write was exceptionally trying. Most often he cried and gave up. His social contacts were strained. There was tension over homework. In addition, his family worried over his long term potential for independent living. They requested a full educational evaluation to help clarify what could be expected of Ryan and what type of educational services would be most helpful for him.

The video series shows you what they learned before determining that Ryan's learning disability was so severe that he would need a comprehensive program of intervention to receive an appropriate education. Ryan now benefits from his placement in a small self-contained class.

These three families were faced with different problems that resulted in different solutions, each appropriate to the needs of the child. The video series uses these case studies as a framework for discussing many of the questions, concerns and options that confront families and others involved with children with learning disabilities.

We hope you find this series useful, and share it with others who might benefit from it. ■



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PART ONE

WHAT IS A LEARNING DISABILITY?

The first video in *We Can Learn* defines and discusses learning disabilities. It will help you identify:

- The characteristics, indicators and warning signs of learning disabilities.
- Reasons to know about learning disabilities.
- Benefits of early intervention.
- Consequences of undetected learning disabilities.

WHAT ARE LEARNING DISABILITIES?

The term, learning disability, was coined in 1963 to describe a group of individuals of at least average intelligence who seem capable of school success, but who have unexplained difficulty in acquiring basic academic skills. Since then experts have grappled with developing a definition that is narrow enough to be useful, but also embraces the variety of characteristics found in those with learning disabilities. In 1975, with the passage of the Education for All Handicapped Children Act (Public Law 94-142), which mandated free appropriate public education for students with handicapping conditions, a legal definition was developed. Although professionals continue to struggle to create a tighter definition for this hidden handicap, they agree that individuals do not have a learning disability if their learning problems and/or school failures are due primarily to:

- impaired vision
- mental retardation
- emotional difficulties
- hearing loss
- environmental factors
- physical disability.

Learning disabilities affect children and adults. The impact of the disability ranges from relatively mild to severe.

WHAT CRITERIA ARE USED TO DECIDE WHETHER OR NOT A PERSON HAS A LEARNING DISABILITY?

Professionals, through interviews, observation and psycho-educational assessment, determine if an individual meets the following criteria:

- Has an average or above average intelligence
- Shows a marked discrepancy between potential and actual achievement or performance
- Performs poorly in school because of difficulty in one or more of the following areas:

basic reading
understanding math concepts
oral expression
written expression
concentration and attention
reading comprehension
mathematical reasoning
listening skills
retaining information.

WHAT ARE THE MOST COMMON CAUSES OF LEARNING DISABILITIES?

Experts do not know with any degree of certainty what causes learning disabilities. Learning disabilities are presumed to be disorders of the central nervous system and a variety of factors may contribute to their occurrence. Learning disabilities may be due to:

Heredity. Learning disabilities tend to run in families. It is not unusual to discover that people with learning disabilities come from families in which other family members have reported similar difficulties.

Problems During Pregnancy and Birth. Learning disabilities can be caused by illness or injury during or before birth. Learning disabilities may also be caused by the use of drugs and alcohol during pregnancy, RH incompatibility with the mother (if untreated), premature or prolonged labor, lack of oxygen or low weight at birth.

Incidents After Birth. Head injuries, nutritional deprivation, poisonous substances, e.g., lead, and child abuse can sometimes result in learning disabilities (Wallace & McLoughlin, 1988.)

Often there does not appear to be a specific cause for many learning disabilities. So parents need not feel guilty or wonder how the learning disability could have been prevented.

WHY IS IT IMPORTANT TO IDENTIFY LEARNING DISABILITIES AS EARLY AS POSSIBLE?

Early diagnosis of learning disabilities, coupled with successful intervention, can help to prevent or ameliorate academic and social failure. Left undiagnosed and untreated, a learning disabled individual will generally experience poor social relationships. Recent studies indicate that undetected learning disabilities may also lead to anti-social behavior, poor employment history and, in some cases, involvement with the juvenile justice system.

If a child is not progressing at an appropriate rate—don't be complacent! The frustration and consequences of living with an undetected learning disability can be profound.

IS A CHILD WHO IS REVERSING LETTERS WHEN S/HE WRITES NECESSARILY LEARNING DISABLED?

Reversing letters and numbers is common in many young children and may persist through early elementary school years. Professionals do not consider reversals (confusing *b* and *d* or *was* and *saw*) significant until the child is older. In addition, a combination of "warning signs" alert us that a child may have difficulty learning school tasks and succeeding in school.

WHAT ARE SOME OF THE SIGNS THAT MIGHT INDICATE A LEARNING DISABILITY?

There is no single indicator of learning disabilities. Unless a child manifests several warning signs consistently and unless the problems persist beyond the extended age, there probably is no need for concern.

AT WHAT AGE IS AN INDIVIDUAL ENTITLED TO SPECIAL EDUCATION SERVICES?

In 1975, the federal government (under Public Law 94-142) mandated that state education agencies provide appropriate education services for school-age students from the age of five through 21. Under the Early Childhood Intervention Act and Public Law 99-457, eligibility for handicapped children from birth to age five has been extended. Check with your State Education Department for details.

IF A PARENT OR PROFESSIONAL SUSPECTS THAT A CHILD HAS A LEARNING DISABILITY, WHAT SHOULD BE DONE?

Professionals should discuss their concern with a parent and then the parent can begin to gather information.

Parents can contact:

- the child's pediatrician
- school guidance counselors/psychologists
- learning disabilities organizations
- the child's teachers
- school administrators
- a professional who knows about testing and evaluations.

COMMON WARNING SIGNS-A CHECKLIST

Does the individual have difficulty with:

ORGANIZATION

- ☐ knowing time, date, year
- ☐ managing time
- ☐ completing assignments
- ☐ organizing thoughts
- ☐ locating belongings
- ☐ carrying out a plan
- ☐ making decisions
- ☐ setting priorities
- ☐ sequencing

PHYSICAL COORDINATION

- ☐ manipulating small objects
- ☐ learning self-help skills
- ☐ cutting
- ☐ drawing
- ☐ handwriting
- ☐ climbing and running
- ☐ mastering sports

SPOKEN OR WRITTEN LANGUAGE

- ☐ pronouncing words
- ☐ learning new vocabulary
- ☐ following directions
- ☐ understanding requests
- ☐ relating stories
- ☐ discriminating among sounds
- ☐ responding to questions
- ☐ understanding concepts
- ☐ reading comprehension
- ☐ spelling
- ☐ writing stories and essays

ATTENTION AND CONCENTRATION

- ☐ completing a task
- ☐ acting before thinking
- ☐ poor organization
- ☐ waiting
- ☐ restlessness
- ☐ daydreaming
- ☐ distractibility

MEMORY

- ☐ remembering directions
- ☐ learning math facts
- ☐ learning new procedures
- ☐ learning the alphabet
- ☐ identifying letters
- ☐ remembering names
- ☐ remembering events
- ☐ spelling
- ☐ studying for tests

SOCIAL BEHAVIOR

- ☐ making and keeping friends
- ☐ social judgement
- ☐ impulsive behavior
- ☐ frustration tolerance
- ☐ sportsmanship
- ☐ accepting changes in routine
- ☐ interpreting nonverbal cues
- ☐ working cooperatively

WORDS AND PHRASES YOU NEED TO BE FAMILIAR WITH

LEARNING DISABILITY: The following definition was incorporated into Public Law 94-142, the Education for All Handicapped Children Act:

"Children with learning disabilities exhibit a disorder in one or more of the basic psychological processes involved in understanding or in using language, spoken or written, which disorder may manifest itself in imperfect ability to listen, think, speak, read, write, spell, or do mathematical calculations. Such disorders include such conditions as perceptual handicaps, brain injury, minimal brain dysfunction, dyslexia and developmental aphasia. Such term does not include children who have learning problems which are primarily the result of visual, hearing or motor handicaps, of mental retardation, of emotional disturbance, or of environmental, cultural or economic disadvantage." (Federal Register, 1977)

Over time, parents and professionals have struggled to clarify the definition of learning disabilities. In 1989 the National Joint Committee on Learning Disabilities (NJCLD) broadened the definition to include individuals of all ages—stating very clearly that learning disabilities are not just conditions unique to those of school age.

"Learning Disabilities is a general term that refers to a heterogeneous group of disorders manifested by significant difficulties in the acquisition and use of listening, speaking, reading, writing, reasoning or mathematical abilities. These disorders are intrinsic to the individual, presumed to be due to central nervous system dysfunction and may occur across the life span. Problems in self-regulatory behaviors, social perception and social interaction may exist with learning disabilities but do not by themselves constitute a learning disability. Although learning disabilities may occur concomitantly with other handicapping conditions (for example, sensory impairment, mental retardation, serious emotional disturbance) or with extrinsic influences (such as cultural differences, insufficient or inappropriate instruction), they are not the result of those conditions or influences." (National Joint Committee on Learning Disabilities, 1989, p.1)

ATTENTION DEFICIT DISORDER: Attention Deficit Disorder (ADD or ADHD) with hyperactivity is identified by the presence of three essential features: inattention, impulsivity and hyperactivity. Please note that in the view of at least one learning disabilities expert, ADHD exists as a disorder together with learning disabilities in about 20–25% of the cases.

Inattention. At least three of the following occur:

- Often fails to finish things he or she starts.
- Often doesn't seem to listen.
- Easily distracted.
- Has difficulty concentrating on school work or other tasks requiring sustained attention.
- Has difficulty sticking to a play activity.

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Impulsivity. At least three of the following occur:

- Often asks before thinking.
- Shifts excessively from one activity to another.
- Has difficulty organizing work (this not being due to cognitive impairment).
- Needs a lot of supervision.
- Frequently calls out in class.
- Has difficulty awaiting turns in games or group situations.

Hyperactivity. At least two of the following occur:

- Runs about or climbs on things.
- Has difficulty sitting still or fidgets excessively.
- Has difficulty staying seated.
- Moves about excessively during sleep.
- Is always "on the go" or acts as if "driven by a motor."

Other characteristics include:

- Onset before age of seven.
- Duration of a least six months.
- Not due to Schizophrenia, Affective Disorder or Severe or Profound Mental Retardation. (American Psychiatric Association, 1980, p. 41)
- Can also exist without hyperactivity.

DISTRACTIBILITY: A child who is distractible pays attention to insignificant stimuli instead of what is relevant at the time. The child may be auditorily distractible, in which case auditory stimuli attract his/her attention easily, or may be overly concerned with visual stimuli. (Bogin, 1985, p. 149).

EARLY INTERVENTION: The early identification and provision of services to individuals, where there is indication of a handicapping condition. The intent is to minimize or eliminate the effect of the handicap. (Bogin, 1985, p. 141).

HYPERACTIVITY: Constant and excessive movement and activity. May be associated with learning disabilities. (Bogin, 1985, p. 141).

RITALIN: The trademark name for a medication, methylphenidate, used to treat children with clear signs of hyperactivity and/or Attention Deficit Disorder. The medication, under carefully controlled and monitored settings, appears to decrease some of the symptoms. Use of this medication is not without controversy and it is essential that ritalin and other medications like it be carefully administered and monitored. In addition, medication should only be prescribed after a thorough evaluation and as part of a total treatment plan (Kirk & Chalfant, 1984).

QUESTIONS FOR DISCUSSION

1. Anna, who is finishing kindergarten, seems to have to lot of trouble remembering things. She is five years old. Unlike her sisters, Anna has been having difficulty learning the alphabet, remembering her address and repeating nursery rhymes. If you were her parents, what would you do?

2. Day after day, Sally comes home from her second grade class saying that she is dumb and that she hates school. What do you think her parents should do?

3. Johnny entered Junior High School with great excitement. However, at the Fall parent's conference his teachers mentioned that his homework assignments often were incomplete, his class notes were sparse and he rarely finished tests on time. What do you think his parents and teachers should do?

REFERENCES

American Psychiatric Association. (1980). *Diagnostic and Statistical Manual of Mental Disorders* (3rd Ed.). Washington, D.C., p. 41.

Bogin, M.B. & Goodman, B. (1985). *Representing Learning Disabled Children: A Manual for Attorneys.* American Bar Association.

Federal Register. (1977). *Definition and Criteria for Defining Students as Learning Disabled, 42: 250, 65083.* Washington, D.C.: U.S. Government Printing Office.

Kirk, S.A. & Chalfant, J.C. (1984). *Academic and Developmental Learning Disabilities.* Denver: Love Publishing Company.

Wallace, S. A. & McLoughlin, J.A. (1988). *Learning Disabilities Concepts and Characteristics.* Columbus, Ohio: Merrill Publishing Company.

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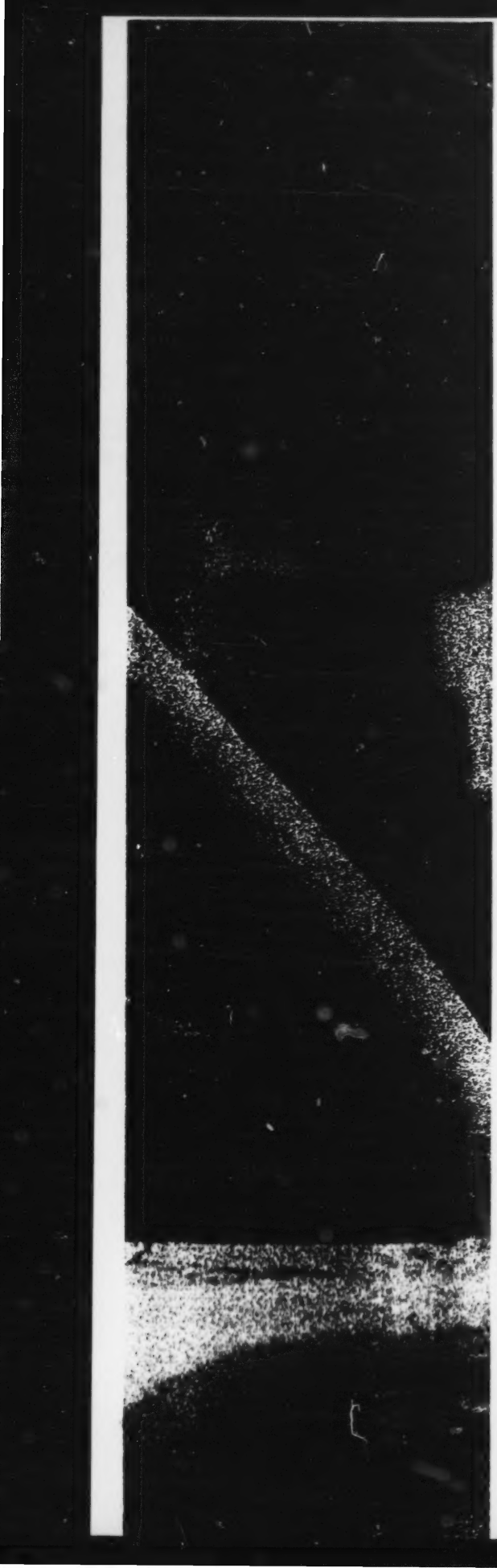


THE IMPACT OF LEARNING DISABILITIES ON FAMILY, SCHOOL AND COMMUNITY

PART TWO

Watching this video will help you to identify:

- The impact a learning disability may have on interactions at school, in the community and within the family.
- Useful techniques for parents and professionals in working with the learning disabled.

WHAT ARE SOME OF THE FEELINGS AND CONCERNS A PARENT MIGHT HAVE ABOUT LEARNING DISABILITIES?

Often when parents learn that their child has a learning disability, that information is met with self-blame, anger, fear and shame. It is not unusual for parents to ask: Why me? Why my child? Why my family? Am I at fault? How did this happen? While parents should not blame themselves for their child's learning problem, they often cannot help but feel uneasy and anxious about their child's future. Parents may feel lost and bewildered. They may be apprehensive about their role in seeing that their child is educated. They may have questions about parenting. Are they overprotecting or overindulging their learning disabled child? Are they offering too much help with their homework? Not enough? Are they shortchanging their other children? How do they balance all family demands? Learning to cope with the learning disability can be a complex, often painful process for the entire family.

HOW CAN PARENTS LEARN MORE ABOUT DEALING WITH A LEARNING DISABILITY?

Many families benefit from outside help in learning to deal with a learning disability. Support groups can be identified through local organizations for the learning disabled. These organizations can offer support and information on:

- behavior management techniques
- rights and responsibilities
- advocacy skills
- medication
- vocational opportunities
- homework issues
- tutors, doctors and therapists
- recreational opportunities
- college programs
- sibling issues.

Through support groups parents can also learn from other families in similar situations. Getting to know other parents who have found solutions to similar issues can be helpful.

WHAT EFFECT CAN A LEARNING DISABILITY HAVE ON A STUDENT'S SCHOOL EXPERIENCE?

Learning disabled students do not learn all subjects at the same rate and in the same way as their non-handicapped peers. Without appropriate intervention, these students generally experience difficulty in school and fall behind. In fact, without appropriate learning strategies, all students can experience difficulties in school.

Continued unsuccessful academic progress has a negative effect on self-esteem and behavior. Frustration and shame may have behavioral manifestations. It is up to parents and professionals to ensure that the proper educational opportunities, remediation and support are available, as mandated by federal law.

HOW MIGHT A LEARNING DISABILITY EFFECT SOCIAL INTERACTIONS?

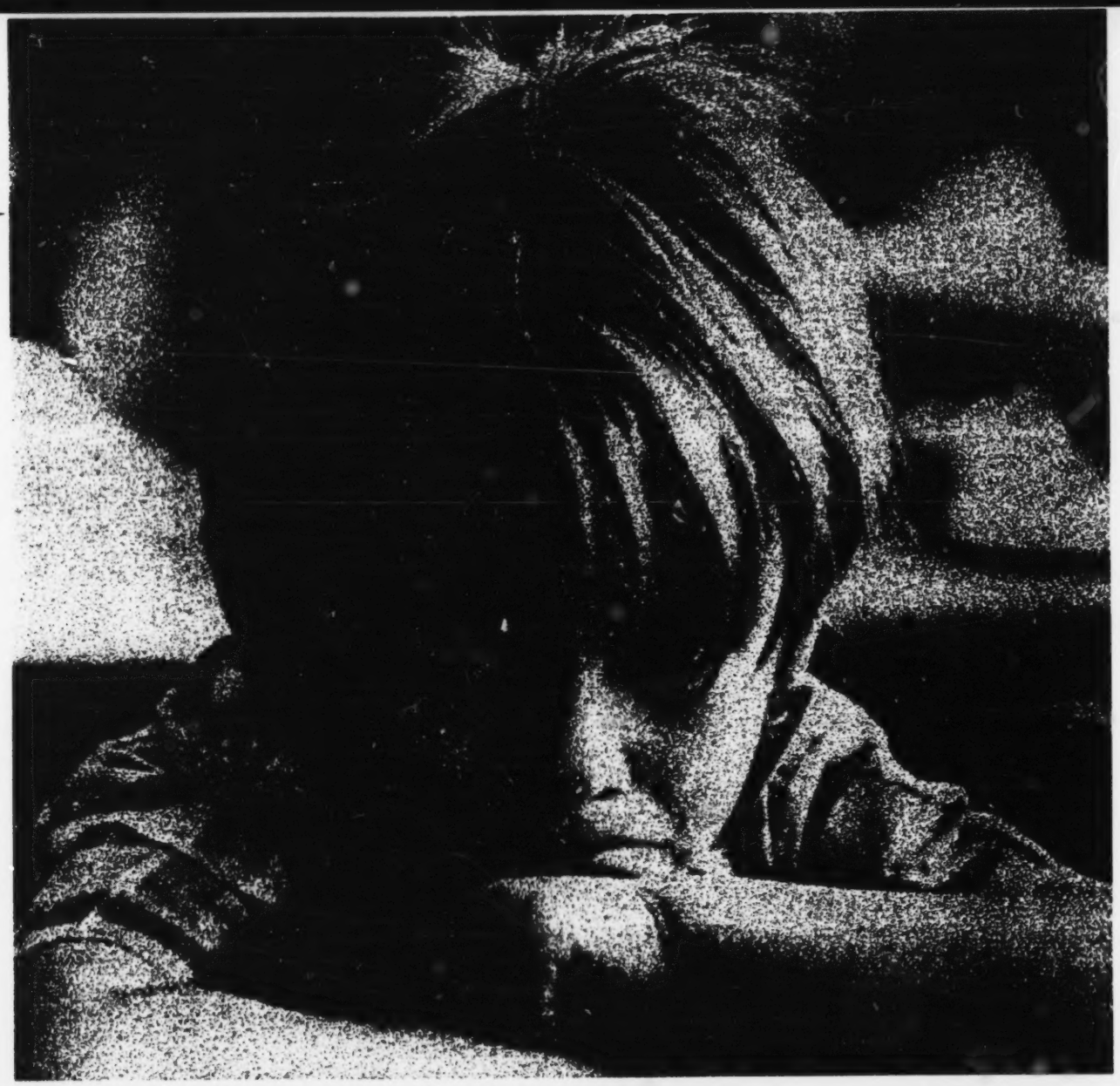
Learning disabled individuals may have difficulty with social interactions. These difficulties can be devastating, often isolating the individual from family members, peers, teachers and co-workers.

Individuals with social disabilities may be unable to:

- initiate and maintain friendships
- tune into other people's feelings
- work or play cooperatively
- judge other people's moods
- read facial expressions
- anticipate consequences
- figure out subtle social cues
- understand the subtlety of normal conversation.

As a result of a social learning disability individuals will frequently:

- have difficulty making friends
- say things at the wrong time and in the wrong place
- fail to understand what causes people to get upset with them
- lack confidence
- develop a poor self-image
- have difficulty carrying on conversations.



CAN LEARNING DISABLED INDIVIDUALS IMPROVE THEIR SOCIAL SKILLS?

Many learning disabled individuals with social disabilities can be taught social skills through modeling and specific instruction. These specialized social skills programs and curricula are designed to help the individual develop better interpersonal skills. For some individuals however, these difficulties continue as a life-long problem, having an impact on their ability to form relationships and to obtain and to maintain employment.

WHAT CAN PARENTS DO TO HELP THEIR LEARNING DISABLED CHILD WITHIN THE FAMILY?

It is clear that working with a learning disabled child challenges a family. Devising a solution to issues that arise in the family is often one of negotiation and compromise involving all family members. Therefore, it is not possible to identify a set list of coping strategies, but there are certain factors that can be taken into account in helping learning disabled individuals function more easily within the family structure. Several suggestions to consider:

- provide structure and guidelines
- be clear about each family member's responsibilities
- review each member's responsibilities *(continued on page 16)*

- develop ways that the learning disabled can be an integral part of family activities
- give sufficient time for the individual to complete tasks
- give deserved praise for effort, not only results
- be clear about family rules
- be consistent in praise, reward, punishment
- try to work out difficulties in a family meeting
- ask for professional assistance.

HOW CAN THE RELATIONSHIP BETWEEN THE LEARNING DISABLED CHILD AND SIBLINGS BE IMPROVED?

Sibling relations may be volatile and potential problems exacerbated when one sibling has a learning disability. There are many reasons. For example, the learning disabled child may misinterpret his brother or sister's actions or the sibling may try in fact to take advantage of the learning disabled child. The non-learning disabled child may be worried about his/her brother or sister or, on the other hand, may be embarrassed by him/her. Often the non-disabled child is jealous because it appears that too much time and energy are spent on their learning disabled sibling. It is hard for parents to remain aloof, but parents can try to:

- avoid overtly comparing the learning disabled individual to his/her siblings
- give some special time to the non-learning disabled sibling
- praise each child for jobs well done independent of one another
- be clear about expectations of each child
- spend "fun time" with the learning disabled child
- avoid asking the non-disabled sibling to be responsible for the learning disabled brother or sister
- avoid being the judge in disputes by setting guidelines for resolution of conflicts
- provide the learning disabled child an opportunity to develop individual interests and hobbies
- create status for the learning disabled child in the family.

ARE THERE SPECIFIC ORGANIZATIONAL TECHNIQUES THAT WILL HELP THE LEARNING DISABLED?

Disorganization is a common trait found in many individuals with learning disabilities. Try to provide structure by:

- developing a daily written schedule including sports, recreation, homework, jobs and responsibilities, therapy and tutoring
- discussing any changes in schedule or routine in advance using a large calendar to keep track of homework, activities, events and assignments
- reviewing activities daily
- designating shelves and drawers to keep gear in one spot, not necessarily neat, but available
- organizing school bags at night or early morning
- anticipating challenging activities and preparing the child in advance.

WHICH ORGANIZATIONAL TASKS ARE PARTICULARLY DIFFICULT FOR LEARNING DISABLED YOUNGSTERS?

Getting homework done correctly and getting to school on time are stumbling blocks for many learning disabled students.

Homework time can be very stressful to manage. Provide a structure that will facilitate homework completion, but try to stay out of the homework helping business. Monitor, but don't constantly intervene. Ask the school to help in checking to see that the homework is completed. School and home should work together.

To get homework assignments at school the student needs to:

- keep a homework notebook, divided by subject and place all homework in notebook
- attach the homework notebook to the looseleaf binder
- write down each assignment during class—or get assistance
- review the assignments with a teacher or friend (for content, due date and format)
- write down due date.

To complete homework assignments the student should:

- set up a special work area (not necessarily at a desk in one's room)
- have a specific homework time
- help to set up a homework schedule (complete the most difficult or time-consuming subjects first)
- have all the books and supplies needed for the assignment organized in one place
- plan long-term projects (for example, set deadlines for the research, outline and first and final draft of the assignment)
- place completed assignments in the book bag immediately.

Getting to school on time, without chaos and parental nagging, is difficult for many children, but can be particularly difficult for the learning disabled child. Have the child:

- figure out how much time s/he needs to get ready
- use a checklist to be sure essentials are packed (e.g. pencils, homework, homework notebook)
- pack books ahead of time, either at night or first thing in the morning
- select clothing the night before.

HOW CAN TEACHERS HELP TO FACILITATE THE HOMEWORK PROCESS?

Teachers can:

- hand out assignment sheets
- put assignments on the chalkboard and repeat them aloud
- stand near the student to monitor without making an issue.

WHAT CAN PROFESSIONALS DO TO HELP THEIR LEARNING DISABLED STUDENTS BECOME MORE ORGANIZED?

Professionals can use certain techniques to be sure that the students understand what is expected of them. For example:

- when setting appointments, write down the appointment, have the student repeat the date and time and identify how s/he will keep the appointment
- teach the individual to repeat or summarize any directions or other important information
- involve the individual in any decision making activities.

HOW CAN PARENTS AND PROFESSIONALS HELP LEARNING DISABLED STUDENTS FUNCTION EFFECTIVELY IN AFTER SCHOOL PROGRAMS?

Learning disabled students enjoy and benefit from a variety of activities. In some cases, experiences may have to be structured to enhance social skills. To facilitate a positive experience:

- identify appropriate activities that the learning disabled child can attend after school
- tell the activity leader how s/he can help the learning disabled child
- be available to the activity leader for questions
- help the child set up play dates.

QUESTIONS FOR DISCUSSION

1. Matthew, age 8, is extremely disorganized. His toys and clothing seem to be everywhere. He cannot seem to find a thing. How can he be helped to become more organized at home?

2. Studying for exams is always a traumatic experience for Jason. He has difficulty memorizing facts and seems to spend too much time on certain topics and not enough time on others. What can be done to help Jason study more efficiently?

3. Carol's sisters have been complaining that because of her learning disability she's been getting "all of the attention" at home. They feel as if their mother has no time to spend with them. Carol's mother feels as if she has failed all of her children. How might Carol's family deal with these issues?

REFERENCES

Osman, Betty B. (1989). *Learning Disabilities: A Family Affair*. New York: Warner Books.

Nuzum, Margaret. (1985). *What Do Teens With Learning Disabilities Want to Know?* New York: 92nd Street YM-YWHA.

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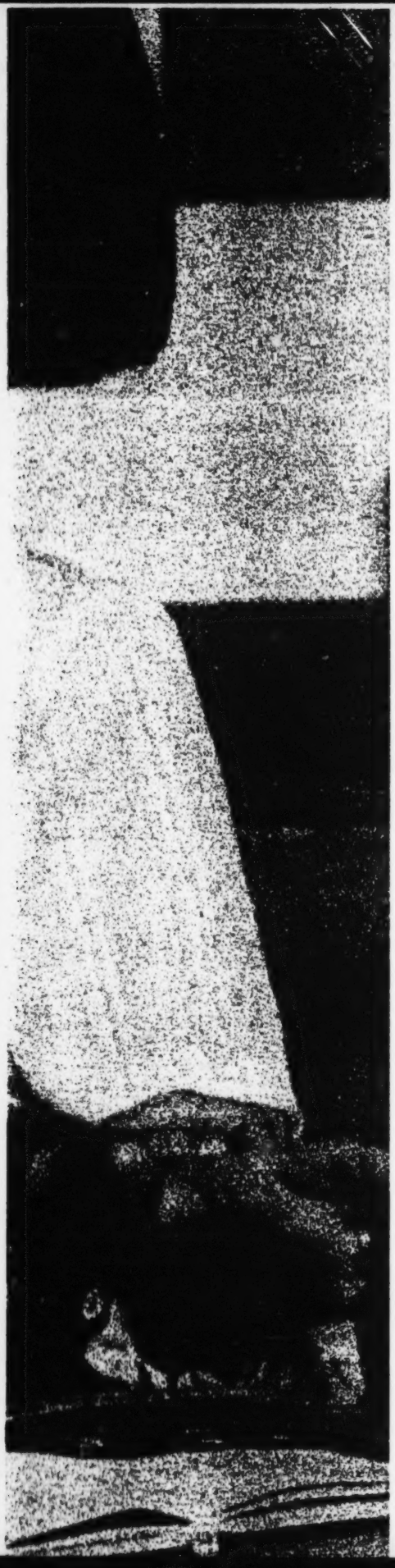


PART THREE

THE ASSESSMENT PROCESS

Watching this video will help you to identify:

- The purpose and use of a comprehensive assessment.
- The components of a comprehensive assessment.
- Uses for the results of an assessment.

WHAT SHOULD BE DONE WHEN A PARENT FIRST NOTICES THAT THE CHILD IS HAVING DIFFICULTY AT SCHOOL?

Parents will want to gather information to clarify their concerns from school personnel and/or others in contact with their child. Initially parents and professionals can:

- clarify the concern
- gather information and anecdotes about the student's school performance from meetings with school personnel
- note strengths and weaknesses both in and out of school
- identify accommodations at school and/or home that might alleviate some of the difficulties
- make accommodations and watch for the effect(s)
- keep records.

IF A STUDENT'S DIFFICULTIES DO NOT IMPROVE, WHAT SHOULD BE DONE NEXT?

A comprehensive educational evaluation should be arranged for the student by the parent(s) or at the suggestion of a professional with written parental permission. The evaluation will help identify areas of strength and of difficulty. The results will help to determine whether or not the student is entitled to some specialized educational help.

HOW CAN AN EVALUATION BE ARRANGED?

According to Public Law 94-142, the public school system must evaluate referred students to determine if special education services are warranted. Referrals can be made by parents or professionals. The evaluation cannot begin without parental consent.

Evaluations can be arranged through:

- the public school system (at no cost)
- private clinics, private evaluators
- hospital clinics
- university clinics.

Note: Some school districts do not honor test results from sources other than the school system itself. Parents should check this before using private facilities.

WHAT ARE THE GUIDELINES ESTABLISHED FOR TESTING BY PL 94-142?

A major concern addressed under PL 94-142 is the appropriate identification of individuals with handicapping conditions. Mandates insure that placement decisions are based on relevant and valid evaluation results.

These guidelines include:

- tests must be given in an individual's dominant language
- children must be tested by a team of trained experts
- valid tests and testing procedures must be used
- placement decisions must be based on the results of a variety of tests.

WHAT IS THE PURPOSE OF A COMPREHENSIVE EVALUATION?

The purpose of an evaluation is to gather information on an individual's academic levels, classroom performance and behavior, intellectual potential, as well as any events that may have contributed to a learning difficulty. The results of the evaluation serve as the basis for determining appropriate educational services and interventions.

WHAT IS INCLUDED IN A COMPREHENSIVE EVALUATION?

An evaluation should include an analysis of background information, an assessment of intellectual potential, an assessment of academic skills and, in some instances, a report on the mental health status or speech and language proficiency. Other evaluations can be given, if indicated, such as a neurological or psychiatric examination. To identify any physical causes for learning problems, a physical evaluation is also required. This information is obtained through interviews with teachers, parents and professionals, classroom observations and formal and informal tests. *(continued on page 21)*

Background Information. The social history or background information, provided by the parents, helps to identify any event in the student's life that might explain a learning difficulty. An interviewer, generally a social worker, asks about:

- family history
- developmental history (e.g., crawling, walking, talking)
- medical history
- social history
- school history (areas of interest, performance, progress, homework skills and attendance).

Assessment of intellectual potential. Currently for placement purposes, a standardized test of intelligence (IQ test) is required. The results of intelligence tests provide an indication of an individual's potential for learning and how s/he can be expected to perform in school. The results of the IQ test provide one estimate of ability but should never be used alone for placement. Common IQ tests for school age children are the Wechsler Intelligence Scale for Children Revised (WISC-R) and the Stanford Binet Intelligence Scale.

Assessment of performance of academic skills. Skill levels in reading, arithmetic, writing and content areas, as well as study habits can be assessed through:

- tests of achievement
- diagnostic tests pinpointing strengths and weaknesses
- observation of classroom behavior and learning strategies
- analysis of class work
- discussions with the teacher and other involved individuals
- informal diagnosis of learning style.

A report of mental health status. The mental health assessment may include an evaluation of social skills, interpersonal skills, social judgement and personality. This information is gathered through observations, interviews, behavior rating scales and/or projective tests. The goal is to determine if underlying emotional issues contribute to the learning difficulty.

WHAT DOES THE WECHSLER INTELLIGENCE SCALE FOR CHILDREN-REVISED (WISC-R) MEASURE?

The most widely used test of intellectual potential for school age children (six years to 16 1/2 years) is the Wechsler Intelligence Scale for Children-Revised (WISC-R). The test is individually administered by a psychologist yielding three scores: Verbal IQ, Performance IQ and a Full Scale IQ. The Verbal Scale and the Performance Scale each contain five subtests and one optional subtest. Each subtest taps different skills and abilities. The results of the verbal subtest gives information about how an individual performs on tasks involving language (for example, doing arithmetic problems without paper and pencil). The performance subtests show how an individual does on tasks that involve object manipulation which do not require verbal responses (for example, putting together puzzles or putting pictures in a sequence to tell a story).

When subtests (see Appendix of this Chapter) are carefully analyzed and compared, a picture begins to develop of some of the individual's intellectual strengths and weaknesses. A comparison between the Verbal IQ scores and Performance IQ scores also yields important information. (Silver, 1984)

Note: Some parents and professionals believe that there are many alternative ways to measure other forms of intelligence and creativity.

ARE THERE ANY INDIVIDUAL TESTS OF INTELLIGENCE FOR CHILDREN WHO ARE YOUNGER THAN SIX YEARS OLD?

There are several measures used to assess the development of cognitive skills in young children, for example:

TESTS	AGE LEVEL TESTED
Stanford-Binet Intelligence Scale Revised	2–Adult
Wechsler Preschool and Primary Scale of Intelligence-Revised (WPPSI-R)	4–6½
McCarthy Scales	2½–8½

IS THERE AN IQ TEST FOR ADULTS?

The Wechsler Adult Intelligence Scale-Revised (WAIS-R) is given to adults over the age of 16. The test is similar to, but not identical to, the WISC-R.

HOW ARE THE RESULTS OF A COMPREHENSIVE EVALUATION USED?

Some evaluators describe themselves as detectives gathering clues and seeking a solution to the student's learning difficulty. To others an evaluation is much like putting together the pieces of a puzzle to create a picture of educationally relevant strengths and weaknesses. The results of the assessment are used:

- to determine whether or not a student is entitled to special education services
- to make decisions about the type and extent of special education services that are appropriate
- to develop an Individualized Education Plan (IEP).

WHAT IS AN INDIVIDUALIZED EDUCATION PLAN (IEP)?

An IEP is a written document that has legal, administrative and instructional purposes. All students receiving special education services must have an IEP based on the evaluation results developed by the school-based team and parents. The IEP must include:

- the student's present levels of educational functioning
- annual goals and short term objectives
- specific special educational services (class placement and related services) to be provided
- the extent to which the child will be educated with non-handicapped peers
- projected dates for initiation and anticipated duration of special education services
- criteria for evaluation of attainment of goals and objectives.

Note: The IEP is developed by the evaluation team, the parents and the teachers. If a parent does not fully understand the IEP, s/he has the right to continue questioning until all sides are in agreement. If agreement cannot be reached, parents may request an impartial hearing.

WHAT IS MEANT BY GOALS AND OBJECTIVES ON AN IEP?

On an IEP, goals are sights toward which instruction is directed. They are the levels that the student should achieve within a given period of time. Objectives are the small building blocks that start at the current level of performance and lead to the goal. The goals and objectives are used to plan appropriate instruction.

WORDS AND PHRASES YOU NEED TO BE FAMILIAR WITH

ACHIEVEMENT TEST: Measures what a pupil has learned to do, based on past instruction in school subjects like reading, mathematics and science.

GRADE EQUIVALENT SCORES OR GES OR GS: A pupil's score on a test is converted into grades and months of the school year. The child's score is compared to that of the typical child at that grade and month receiving each score on the test. Grade equivalent scores should be converted to percentile ranks so that scores from one test can be compared to one another.

INTELLIGENCE OR IQ TESTS: Tests a child's brightness or quickness to learn school material. These tests include tasks which sample behaviors (verbal, nonverbal and numerical) related to general school ability. They are one type of aptitude test that helps to predict the child's ability to learn school work.

I.Q.: Intelligence quotient. A score from a test measuring a child's intelligence. The average IQ score is 100.

PERCENTILE RANK OR PR: PR is a score that tells how a child ranks on a test in relationship to others in the group taking the test. It tells the percent of children receiving a score at or below the one reported for the child. A percentile rank of 68 means that the child scored at a level at or above 68 percent of children taking that test. Similarly, a percentile rank of 20 means that the child scored at a level at or above 20 percent of children taking that test.

PROJECTIVE TEST: Tests in which the person responds to non-structured material, such as inkblots, or draws, or tells stories about ambiguous pictures. Projective tests assume that a person's projections are indicative of that person's personality. (*Note:* Some diagnosticians use the word projectile.)

SCREENING: Identification of the skills of pupils at an initial stage so as to separate those who have such skills for instruction from those who do not, then receive special instruction. Screening is also used as the initial procedure to identify those children who need diagnostic testing.

STANDARDIZED TESTS: Tests given under uniform conditions, using the same directions, materials and time limits, to ranges of children across the country.

VOCATIONAL TESTING: Testing to determine a pupil's aptitudes, preferences and interests which can aid in making a vocational decision (Definitions selected from glossary Boehm & White, 1982).

QUESTIONS FOR DISCUSSION

1. John has had great difficulty learning his basic math and reading skills. He seems bright and sociable, but he is beginning to flounder in the third grade. A comprehensive evaluation has been suggested. How might his parents prepare for this process?

2. Michael is an adorable four year old. However, his parents are concerned about his inability to pronounce words clearly, to draw and to climb. Michael's pediatrician has suggested that he be given an IQ test to "get a handle on the problem." What would you suggest?

REFERENCES

Arena, J. (1978). *How to Write an IEP.* Novato, CA: Academic Therapy Publications.

Boehm, A. E. and White, M. A. (1982). *The Parent's Handbook on School Testing.* New York: Teachers' College Press.

Silver, L. (1984). *The Misunderstood Child.* New York: McGraw-Hill Book Company.

APPENDIX

WISC-R SUBTESTS-VERBAL SCALE & PERFORMANCE SCALE

■ Verbal Scale Subtests

Information. This subtest measures the amount of general knowledge a person has acquired both in school and as a result of life experiences in the family or elsewhere. Children with learning disabilities who do poorly in school might have picked up a lot of general information outside of school and tend to do well on this subtest.

Comprehension. This subtest measures abstract thinking and one's ability to comprehend concepts. This test may possibly measure basic native intelligence separate from learned knowledge.

Similarities. This subtest measures abstract thinking by asking how things are alike or different. This test, like comprehension, aims to measure basic native intelligence.

Arithmetic. This subtest measures one's numerical reasoning ability by using verbal problems, that is, story problems written out in words. Children who are below grade level in arithmetic may do poorly.

Vocabulary. This subtest requires a child to define or explain the words given. It measures general exposure to words as well as words learned in school.

■ Performance Scale Subtests

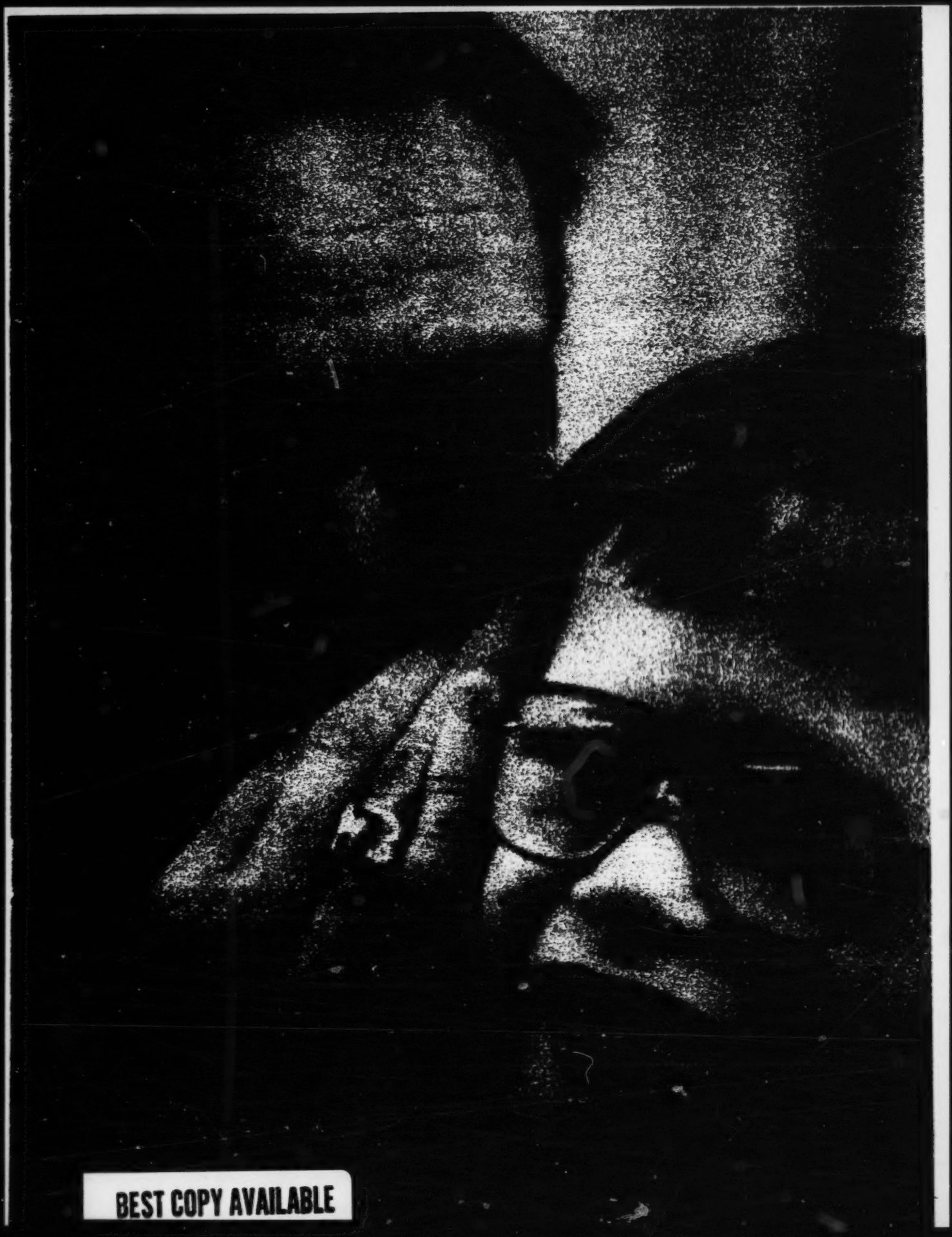
Picture Completion. This subtest requires the ability to analyze a total picture and identify what is missing. The child has to find the missing part and place it into the total picture.

Picture Arrangement. This subtest requires the ability to pick up clues suggesting a necessary sequence of events. Pictures must be placed together to tell a coherent story.

Block Design. With a set of blocks available, the child must look at a picture of a design, then put the blocks together to make that design. The child must analyze the whole complex picture, then break down the pattern into its parts so as to know which blocks to put where.

Object Assembly. This subtest presents the parts of an object (e.g., a person) which the child must put together. This calls for abilities opposite to those needed for picture completion or block design. Here the parts must be analyzed and put into a whole.

Coding. A code is given (e.g., 2=*), then a sequence is given. The child must use the code to decode the sequence. For example, the alphabet might be listed, A through Z. Next to each is a symbol. Then, a message is written using the symbols. This message must be decoded using the code provided. (Silver, pgs. 112–113)



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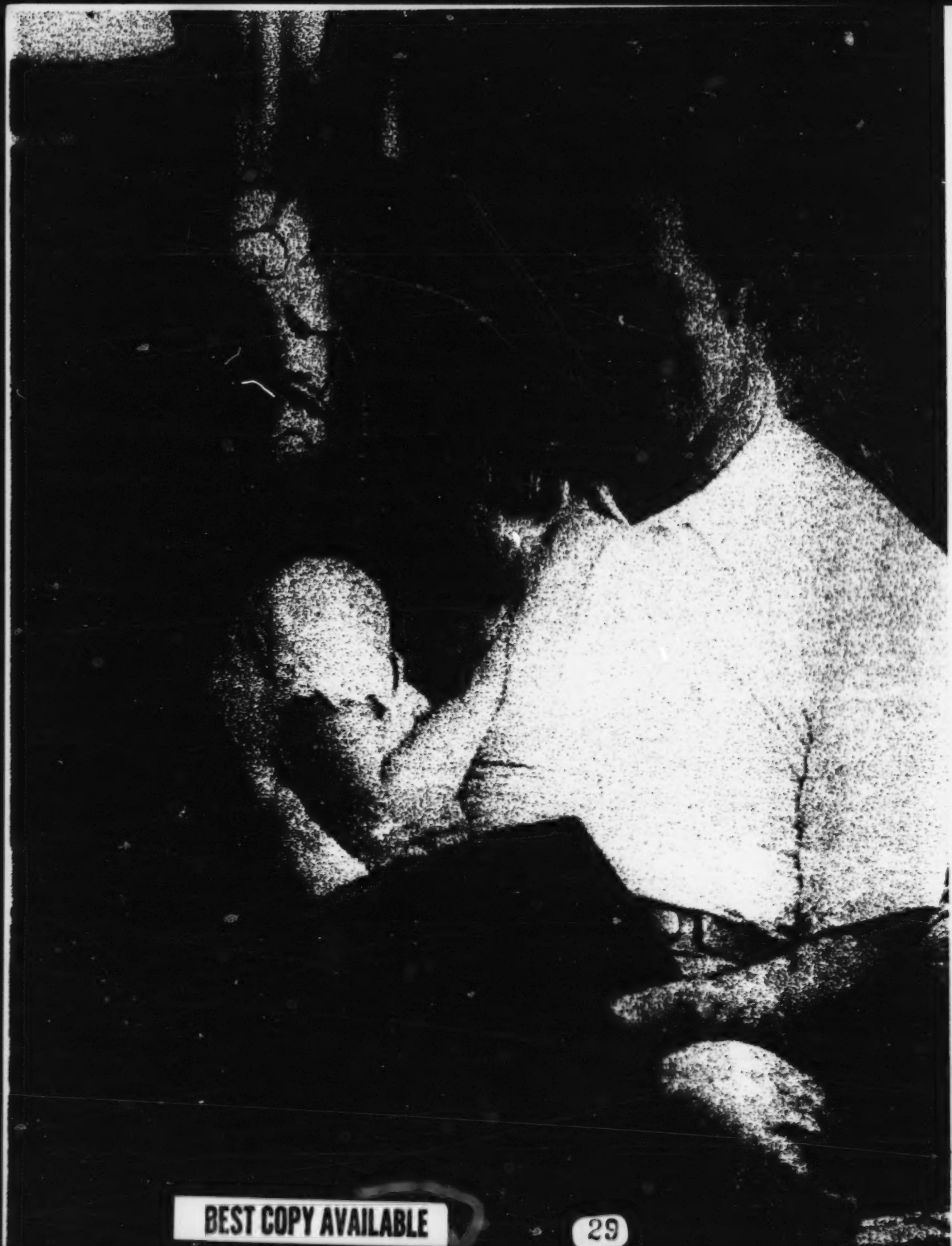
LEGAL RIGHTS OF CHILDREN AND YOUTH WITH HANDICAPPING CONDITIONS

PART FOUR

Watching this video will help you to identify:

- Rights guaranteed by Public Law 94-142.
- Effective Advocacy Techniques.
- Ways parents and professionals can secure appropriate services for students.



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WHAT PROTECTIONS ARE GRANTED TO PARENTS AND CHILDREN ENTERING THE SPECIAL EDUCATION PROCESS?

Under PL 94-142, parents of children in the special education process are granted the right to be informed and involved and the right to specific legal safeguards (due process procedures).

To be informed means that:

- parents must be informed about the reason for their child's referral to the special education process
- parents must be told about the special education process and what is available to a student with a handicapping condition
- parents must be invited to all educational planning conferences at a time that is convenient for them
- parents must be aware of due process rights and legal safeguards. These rights must be clearly explained to them in their dominant language.

To be involved means that:

- parents are encouraged to provide information relevant to an evaluation
- parents are encouraged to be partners in developing the Individualized Education Plan (IEP)
- parents are encouraged to be involved in deciding which educational setting is appropriate to meet the child's needs
- parents can participate in developing recommendations that are educationally appropriate.

Due process rights guarantee:

- that a child cannot be evaluated or placed in a special education class without parental consent
- that parents can disagree with the school district's recommendations (such as referral, evaluation, placement, IEP)
- if any disputes cannot be resolved with the school evaluation team, the parent (or school system) has a right to an impartial hearing in which a third party listens to evidence from both sides and resolves the dispute.

HOW CAN PARENTS AND PROFESSIONALS BECOME MORE EFFECTIVE ADVOCATES?

To be an effective advocate:

- talk to professionals in organizations for the learning disabled
- clearly identify your concerns
- know the rights of the child and parent *(continued on page 28)*

- keep complete records
- be specific about what the student needs
- trust your judgement
- be assertive
- ask questions
- take the time necessary to make a good decision.

WHAT RECORDS SHOULD BE KEPT BY PARENTS?

Keep a notebook with all papers and a record of every school contact. Remember to:

- copy any communication sent starting with the referral letter
- note all telephone conversations with date, time, contact, reason for call and result
- describe all meetings with date, time, place, individuals involved and content of meeting
- note any questions for subsequent meetings
- keep copies of evaluation results, notes from teachers, report cards.

HOW DOES A PARENT OR ADVOCATE PREPARE FOR AN EVALUATION AND PLACEMENT MEETING?

If you are organized and have your facts and any questions in front of you, you will be calm, clear and forceful at the educational planning conference. Write the following in your notebook and take it to the meeting:

- note the reason that you agreed to have the meeting
- describe your child's academic strengths, e.g., Johnny knows how to tell time, he loves to be read to
- describe areas of weakness, e.g., Johnny cannot get organized to do his homework; he does not know his times tables
- describe the child's social relationships, e.g., does s/he have friends? Does s/he play well with this peers? What causes her/him to fight?

In addition, list the following about the child:

- likes
- dislikes
- attention span
- temperament
- what you think will help him/her at school
- any questions you may have.

WHAT SHOULD A PARENT KNOW ABOUT MEETING WITH THE EVALUATION TEAM?

- a meeting must be scheduled when the parent is available to attend
- parents may ask to have meetings re-scheduled
- take the notebook with all papers and record of contacts
- have questions ready
- a parent may take a friend or an advocate with them
- a parent may ask for additional time to review the evaluation results
- a parent does not have to agree with the recommendations made at the time of meeting
- a parent has time to seek additional professional advice.

WHAT ROLE DO PARENTS PLAY IN THE EVALUATION AND PLACEMENT PROCESS?

Parents play an important role throughout the evaluation and placement process. Understanding the order in which the process unfolds and noting dates and contact persons are essential to a smooth process. On the right is a checklist that can be used to keep track of events during the evaluation and placement process.

WORDS AND PHRASES YOU NEED TO BE FAMILIAR WITH

DUE PROCESS HEARING: Is a formal procedure to resolve any disputes that may arise between parents and school districts over recommendations in the special education evaluation process and/or the provision of special education services. The due process hearing provides both sides the opportunity to provide evidence to support their position to a third party. The third party, an impartial hearing officer, makes a decision on the disputed issue after evaluating the evidence presented. (In some states there is an opportunity to appeal the decision of the impartial hearing officer to the State Education Department.)

LEAST RESTRICTIVE ENVIRONMENT: A phrase from PL 94-142 which describes a condition of special education placement. Students must be educated to the maximum extent appropriate with non-handicapped peers.

PL 94-142: The Education of All Handicapped Children Act (EHA), enacted in 1975, mandates that state education agencies provide all students with handicapping conditions free, appropriate education in the least restrictive environment.

PL 101-476: Individuals with Disabilities Education Act (IDEA)—In October 1990, President Bush signed into law the Education of the Handicapped Act Amendments of 1990, changing the name of the EHA to Individuals with Disabilities Education Act. Along with renaming the law, the 1990 EHA Amendments replace the term "handicapped" with the term "disabilities" and expands the general definition of children with disabilities to include children with autism and traumatic brain injury. Other changes include:

- a new definition of transition services
- a requirement that the Individualized Education Plan (IEP) include a statement of the required transition services for students
- an addition of "rehabilitation counseling" and "social work services" to the definition of "related services"
- a greater emphasis on outreach to meet the needs of children with disabilities from minority backgrounds.

QUESTIONS FOR DISCUSSION

1. Bob's parents are concerned about their upcoming meeting with the school evaluation team. They are worried about becoming nervous and flustered in front of the evaluators. What could they do to make things go more smoothly?

2. Rachel's parents feel that they did not have sufficient input into the development of an IEP for their daughter. They feel that the IEP that has been developed for her will not meet her academic and social needs. Is there anything they can do?

CHECKLIST FOR THE EVALUATION AND PLACEMENT PROCESS

	DATE	CONTACT
Referral letter sent		
Referral letter received		
Confirmation call made		
Written consent given		
Parent interview scheduled		
Evaluation initiated		
Evaluation completed		
Educational planning conference held		
Type(s) of special education service(s) recommended		
Recommendations agreed to		
Class placement recommendation made		
Recommended placement site visited		
Class placement agreed to		
IEP developed		
IEP signed		

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UNDERSTANDING, NEGOTIATING AND OBTAINING APPROPRIATE SERVICES

PART FIVE

Watching this video will help you identify:

- The range of educational services available to learning disabled youth and adults.
- Related services available to learning disabled youth and adults.
- The range of supplementary and/or extra-curricular services available to learning disabled youth and young adults.

WHAT CRITERIA ARE USED IN SELECTING THE APPROPRIATE CLASS PLACEMENT?

Placement recommendations are made by school system officials and parents. Placement decisions should:

- be based on the results of the comprehensive evaluation
- provide appropriate academic support and related service(s)
- offer education with non-handicapped peers to the maximum extent possible (least restrictive environment)
- be reviewed annually
- take into account student/teacher ratio
- take into account non-academic as well as academic skills and needs.

CAN A STUDENT BE PLACED IN A SPECIAL EDUCATION CLASS WITHOUT PARENTAL PERMISSION?

By law parents must give written permission before their child can receive any special education services. However, if the school system and the parents cannot reach an agreement on an appropriate placement, either party can file for an impartial hearing. The impartial hearing officer, after hearing arguments from both sides, will rule on the appropriateness of the placement recommendations.

WHAT SHOULD A PARENT LOOK FOR WHEN VIEWING A CLASS SETTING?

Parents can consider educationally relevant factors when deciding if a particular class is appropriate for their child. Parents can meet with school staff to find out:

- Do other students in the class have similar educational, social and management needs?
- Are materials appropriate and interesting? Will they be challenging and address the specified need?
- Does the teacher address the needs of the class members individually as well as in small groups?
- Is the class involved in learning activities for a major portion of the day?
- Are the students working on academic tasks?
- Is the special education setting conducive to learning?
- Is the setting supportive and comfortable for the child?

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WHAT TYPE OF PLACEMENTS ARE AVAILABLE TO STUDENTS IN NEED OF SPECIAL EDUCATION SERVICES?

There is a range of placement options outlined in the diagram of services below:

—*Least Restrictive Setting*	Regular class without accommodations
	Regular classes with in-class accommodation
	Regular class plus supplementary instructional services
	Part-time Special Education class
	Full-Time Special Education class
	Special day school
	Homebound
Most Restrictive Setting	Instruction in hospital, residential or total care settings

(Adapted from Deno, 1978)

WHAT ARE RELATED SERVICES?

Related services are services outside of the classroom placement that address identified specific needs. Related services are special accommodations or may be services provided individually or in small groups by a specialist. A student may be provided with one or more related services. Related services may include:

- counseling/psychotherapy
- occupational therapy
- adaptive physical education
- speech and language
- physical therapy
- transportation.

IF THE SCHOOL SYSTEM RECOMMENDS THAT A CHILD NEEDS SPECIAL EDUCATION SERVICES, BUT A PARENT DISAGREES, WHAT HAPPENS?

According to the federal law PL 94-142, parents have the "right to disagree" and may invoke procedures to ensure their due process rights. If representatives of the school system and the parents cannot negotiate a settlement, they can resort to an impartial hearing. A hearing officer arbitrates the dispute and makes a decision concerning the child's placement based on the information presented to him.

If there is still a disagreement, it is possible in some states to appeal to a state arbitrator.

ONCE A CHILD IS IN A SPECIAL EDUCATION SETTING, IS THERE ANYTHING ELSE THAT A PARENT CAN OR SHOULD DO?

Parents should follow their child's progress to ensure that s/he is making the expected progress. Parents should work in cooperation with the teacher to develop the IEP. Parents have the right and responsibility to monitor their child's progress. Even in the best of settings, adjustments may be needed on the child's behalf to ensure an appropriate education.

ONCE A STUDENT IS LABELED LEARNING DISABLED, IS S/HE ALWAYS PLACED IN SPECIAL EDUCATION PROGRAMS?

Students in special education are evaluated at prescribed intervals. If a subsequent evaluation shows that the student no longer needs special education services, the student is declassified, which means that the student returns to the regular education classes.

WHAT KINDS OF PROGRAMS SHOULD SPECIAL EDUCATION STUDENTS BE INVOLVED IN AFTER SCHOOL?

Students should be involved in a variety of after school activities which develop social skills and respond to their interests. Activities might include sports, arts and crafts, music, scouting programs, camp, etc. Often learning disabled students can participate with non-learning disabled students in after-school activities.

HOW CAN LEARNING DISABLED STUDENTS LEARN ABOUT VOCATIONAL OPPORTUNITIES?

As part of the evaluation process, older students should be given a vocational assessment. This assessment is designed to indicate a vocational preference. The results of the assessment may be used to guide learning disabled students in selecting a vocational school.

IS VOCATIONAL TRAINING AVAILABLE IN HIGH SCHOOL?

Students may select vocational training programs in most school districts. Choices should be based on interest inventories or vocational assessments. Special attention will need to be given to students with learning disabilities to ensure that they select programs that complement and support their skills. Some learning disabled students benefit more from job readiness programs and a broad career exposure. The approach to vocational training must be individually tailored.

DO STUDENTS WITH LEARNING DISABILITIES GO TO COLLEGE?

Students with learning disabilities may go on to college, many in regular programs. Increasing numbers of colleges are developing specialized programs for students who are learning disabled. These programs vary in intensity and support. Students must be careful to select a school offering the type of support that is appropriate for their needs.

WORDS AND PHRASES YOU NEED TO BE FAMILIAR WITH

DUE PROCESS: Due process procedures apply to the legal safeguards of the special education process. These procedures are to ensure that parents are informed of any recommendations in the special education process and that there is a mechanism to settle disputes between parents and the school system.

MAINSTREAMING: Refers to the time an individual who is in a special education class spends with non-handicapped peers. Mainstreaming may occur in non-academic settings, e.g., gym or art class, or academic periods like reading, science or social studies.

RELATED SERVICES: Special services, in which students are taken out of the classroom for specific individual or small group instruction that address specific education needs, e.g., counseling, speech and language, occupational therapy. Special transportation is also a related service.

RESOURCE ROOM: The resource room is a "pull out program" for children who spend more than half of their day in a regular class. During the time that the student is in the resource room (usually one or two periods a day) s/he is given intensive small group or individual instruction.

SELF-CONTAINED CLASSROOM: The self-contained classroom is a class-setting with a small group of students (e.g., 12, with one teacher or a teacher and an assistant). All the students in the class are identified as in need of special education services and should have similar educational needs.

QUESTIONS FOR DISCUSSION

1. Jeremy has been going to the resource room in his elementary school one period a day. His mother is concerned about his academic progress. Although he has been attending the resource room for the entire third grade year, he is still not reading. What can his mother do?

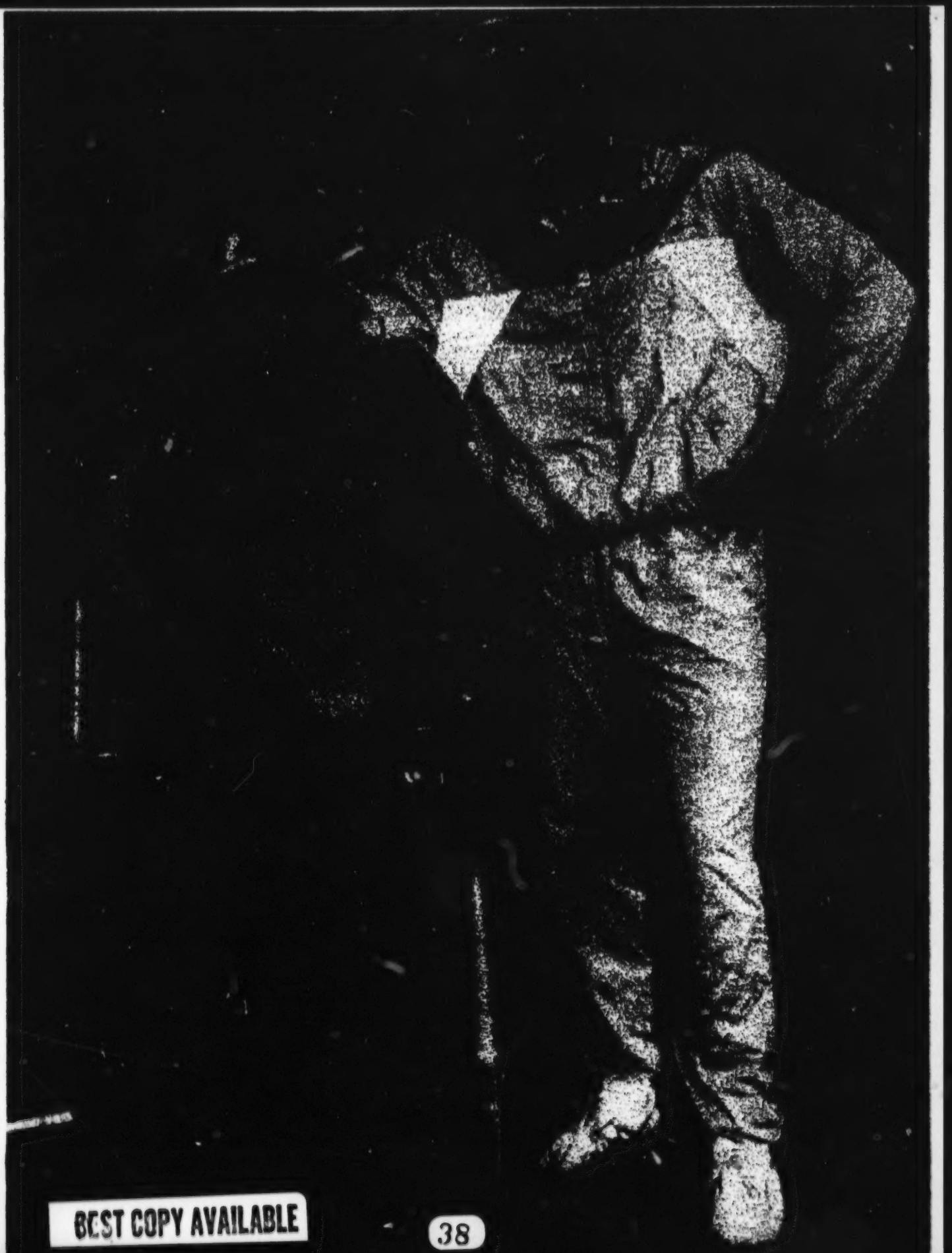
2. Sally came home from her second grade class, day after day, crying and saying that she is dumb and that she hates school. What should her parents do?

3. Jamie comes to the after-school homework help center. His knapsack and notebook are always in disarray. He isn't clear about what his day's assignments are and has trouble getting started. How can he be helped?

4. John is an immature child who has had difficulty in learning his basic skills. He seems bright and sociable and his mother's friends tell her not to worry, that he'll catch up! He is floundering in the 4th grade. What would you advise his mother?

REFERENCES

Deno, E. N. (1978). *Educating Children with Emotional, Learning and Behavior Problems*. Minneapolis, Minn.: University of Minnesota, Leadership Training Institute/Special Education.



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